

**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF WASHINGTON**

CREDIT CARD COLLECTION NETWORK AUTHORIZATION FORM

We/I hereby authorize the United States District Court for the Eastern District of Washington to charge the following bank card number(s) for payment of filing fees and other court related expenses:

Name as it appears on Card: _____

Name of Firm/Company: _____

Name of other authorized users: _____

Cardholder's Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone No. _____ Fax No.: _____

Master Card No. _____ Exp. Date: _____

Visa Card No. _____ Exp. Date: _____

Discover Card No. _____ Exp. Date: _____

American Express: _____ Exp. Date: _____

Diners Club No.: _____ Exp. Date: _____

Please indicate if this information is NEW UPDATED

This form will be kept on file in the Clerk's Office and shall remain in effect until specifically revoked in writing. It is the responsibility of the firm/company named herein to notify the Clerk's Office of the new expiration date when a credit card has been renewed or if a card has been canceled or revoked.

Signature: _____ Date: _____

In the event the charge against this account is denied, you will be notified immediately to make payment in cash, money order or certified check. Any abuse of this privilege may result in your removal from the credit card program.

****PLEASE RETURN COMPLETED FORM TO THE FINANCIAL DEPARTMENT, U.S. DISTRICT COURT, EDWA, 920 W. RIVERSIDE, ROOM 840, PO BOX 1493, SPOKANE, WA 99210.**